



General Assembly

January Session, 2003

***Amendment***

LCO No. 6121

\*SB0099906121SD0\*

Offered by:

SEN. SULLIVAN, 5<sup>th</sup> Dist.

To: Subst. Senate Bill No. 999

File No. 405

Cal. No. 275

***"AN ACT CONCERNING THE ADMISSION AND CARE OF  
PATIENTS IN NURSING HOMES."***

1 After the last section, add the following and renumber sections and  
2 internal references accordingly:

3 "Sec. 501. Subsection (c) of section 19a-550 of the general statutes is  
4 repealed and the following is substituted in lieu thereof (*Effective*  
5 *October 1, 2003*):

6 (c) The patients' bill of rights shall provide that a patient in a rest  
7 home with nursing supervision or a chronic and convalescent nursing  
8 home may be transferred from one room to another within a facility  
9 only for the purpose of promoting the patient's well-being, except as  
10 provided pursuant to subparagraph (C) or (D) of this subsection or  
11 subsection (d) of this section. Whenever a patient is to be transferred,  
12 the facility shall effect the transfer with the least disruption to the  
13 patient and shall assess, monitor and adjust care as needed subsequent  
14 to the transfer in accordance with subdivision (10) of subsection (b) of

15 this section. When a transfer is initiated by the facility and the patient  
16 does not consent to the transfer, the facility shall establish a  
17 consultative process that includes the participation of the attending  
18 physician, a registered nurse with responsibility for the patient and  
19 other appropriate staff in disciplines as determined by the patient's  
20 needs, and the participation of the patient, the patient's family, a  
21 person designated by the patient in accordance with section 1-56r or  
22 other representative. The consultative process shall determine: (1)  
23 What caused consideration of the transfer; (2) whether the cause can be  
24 removed; and (3) if not, whether the facility has attempted alternatives  
25 to transfer. The patient shall be informed of the risks and benefits of  
26 the transfer and of any alternatives. If subsequent to the completion of  
27 the consultative process a patient still does not wish to be transferred,  
28 the patient may be transferred without the patient's consent, unless  
29 medically contraindicated, only (A) if necessary to accomplish physical  
30 plant repairs or renovations that otherwise could not be accomplished;  
31 provided, if practicable, the patient, if the patient wishes, shall be  
32 returned to the patient's room when the repairs or renovations are  
33 completed; (B) due to irreconcilable incompatibility between or among  
34 roommates, which is actually or potentially harmful to the well-being  
35 of a patient; (C) if the facility has two vacancies available for patients of  
36 the same sex in different rooms, there is no applicant of that sex  
37 pending admission in accordance with the requirements of section 19a-  
38 533 and grouping of patients by the same sex in the same room would  
39 allow admission of patients of the opposite sex, which otherwise  
40 would not be possible; (D) if necessary to allow access to specialized  
41 medical equipment no longer needed by the patient and needed by  
42 another patient; or (E) if the patient no longer needs the specialized  
43 services or programming that is the focus of the area of the facility in  
44 which the patient is located. In the case of an involuntary transfer, the  
45 facility shall, subsequent to completion of the consultative process,  
46 provide the patient and the patient's legally liable relative, guardian or  
47 conservator if any or other responsible party if known, with at least  
48 fifteen days' written notice of the transfer, which shall include the  
49 reason for the transfer, the location to which the patient is being

50 transferred, and the name, address and telephone number of the  
51 regional long-term care ombudsman, except that in the case of a  
52 transfer pursuant to subparagraph (A) of this subsection at least thirty  
53 days' notice shall be provided. Notwithstanding the provisions of this  
54 subsection, a patient may be involuntarily transferred immediately  
55 from one room to another within a facility to protect the patient or  
56 others from physical harm, to control the spread of an infectious  
57 disease, to respond to a physical plant or environmental emergency  
58 that threatens the patient's health or safety or to respond to a situation  
59 that presents a patient with an immediate or potential danger of death  
60 or serious physical harm. In such a case, disruption of patients shall be  
61 minimized; the required notice shall be provided within twenty-four  
62 hours after the transfer; if practicable, the patient, if the patient wishes,  
63 shall be returned to the patient's room when the threat to health or  
64 safety which prompted the transfer has been eliminated; and, in the  
65 case of a transfer effected to protect a patient or others from physical  
66 harm, the consultative process shall be established on the next business  
67 day."